

# LEAHI HOME FOR INCURABLES



**PICTURESQUE** RAMBLING group of red colored buildings, on a rise between the Wai-lae car line and Fort Ruger, is the Leahi Home for Incurables, an institution which takes the place and does the work of a dozen institutions usually found in large cities. The home is a hospital in every sense of the word, but it is not simply a hospital for incurables, for there are many who enter the doors of the home lost to all hope and who later on emerge, if not entirely cured, yet so improved in health as to be able to follow their ordinary vocations in varied walks of life.

The home takes the place of an almshouse, of a county hospital, of a home for the aged and decrepit, and of a sanatorium for cases of tuberculosis. The institution is not a self-supporting one by any manner of means; on the contrary, were it not for the financial assistance rendered by the government, by the Board of Health, by the Board of Supervisors, and the interest received from the endowment fund the home would close its hospitable doors in a very short space of time.

The present home is the outcome of an institution started thirteen years ago, when several cases of destitute consumptives were refused admission in certain boarding and rooming houses, and were even turned away from the hospitals. These consumptives, together with some others who had very little money and were dependent on the charity of their friends, were a constant source of danger to the community at large and a movement was started at the celebration of Queen Victoria's Diamond Jubilee to afford them relief. The movement succeeded, insofar that the Victoria Hospital established in an old kerosene warehouse in Kakaako, where for several years it struggled along doing a noble work with but little money. But the location of the hospital was enough to condemn it from the very outset, though even amid the most insanitary conditions which then prevailed it did good work, accommodating from fifteen to twenty patients,

about equally divided between tubercular and non-tubercular patients.

Among the many of all nationalities and of all creeds who gave time, labor and money in the endeavor to increase the utility of the hospital, two names stand out prominently, viz, the late Alexander Young and the late S. E. Damon. Mr. Young gave a sum of money sufficient to ensure the hospital becoming an accomplished fact, and others, as generous and as large hearted as he himself was, encouraged no doubt by his example, came forward and assisted the project to the best of their ability. Mr. Damon—"Eddie" as he was most affectionately termed by all classes in the community of that day—might well be called the executive officer of the Board of Trustees, for it was he who by rigid economies performed wonders with the small funds available. It was Eddie Damon who was one of the moving spirits in the planning, opening and managing of the Leahi Home, which took the place of the Victoria Home, when the finances of the last-mentioned institution had flourished to a degree warranting the change.

The Victoria Hospital was closed on September 3rd, 1902, and the Leahi Home opened the same day. By many people then, as now, the change in the name was deeply regretted. It was, indeed, a pity that the new home was not named after its predecessor and thus have perpetuated the name of the brave little institution that fought so gallantly for existence in the beginning when the way was hard and thorny. The new name "Leahi Home" was not an improvement—almost any name would have been quite as good. It is a hard name for the mal-linists to pronounce and to them it conveys nothing.

When the Leahi Home was started in 1902 the funds in hand amounted to about \$100,000. To construct, equip and furnish the new home required an expenditure of about \$40,000, and the remainder was turned into an endowment fund, the interest thereon being sufficient to support from twelve to fourteen patients. But the home has grown with the years and the interest on the endowment fund does not nearly meet the expenses necessary for the upkeep of the institution, though the greatest economy is practiced. The Victoria Hospital could

accommodate fifteen to twenty patients; the Leahi Home has floor space for from seventy-five to eighty, though at present there are only beds for sixty.

At the home today there are fifty-three patients, and of these forty-five are on the free list, only eight paying for the attention they receive. Patients are accepted in the home from all grades in life, and a sliding scale is in force whereby the well-to-do can pay in full for the treatment they receive, others can pay what they can afford, and the destitute receive identical treatment at absolutely no cost to themselves. No case of sickness which calls for treatment in the hospital will be turned away as long as there is a bed for the patient and the wherewithal to provide food and medicine. The utmost indifference is paid to the race or creed of the applicant. The average number of patients in the home during the past year was in the neighborhood of fifty, the greatest number being fifty-nine. It is a noticeable fact that men avail themselves of the advantages of the home to a far greater extent than women-folk. Of the fifty-three at present being succored, there are 48 males and only five females, and at no time since the Leahi home has been started has there been more than eleven women patients at any one time.

The home is for the relief of tubercular and non-tubercular patients and on an average there are fifty-five non-tubercular to every forty-five tubercular patients in the hospital. Today there are 25 tubercular and 28 non-tubercular cases. At far as the benefit to the community is concerned, however, the work done for the tubercular patients is by far the most important.

As to the utility of the home there can be no doubt. One has only to pay the home a visit to be convinced of this. It is an institution which deserves a far greater measure of public support than is accorded it today, and its operations could be extended to a far greater extent were there more public interest manifested in its welfare. In order to make an inspection of the hospital for the purpose of this article a representative of The Star called up Mr. H. A. Taylor, the assistant medical attendant and was at once heartily welcomed. To all who wish to see for themselves how the home is conducted the same cordial invitation is extended. The work is all done at the home and the fullest investigation is courted. When the writer entered the gates of the institution and passed up the avenue to the office he was greeted by Mr. Taylor and taken over the entire buildings. From the entrance one reaches the office at the end of the avenue, shaded by young palms, banyan trees, pepper trees and shrubs. The office occupies the central portion of a two-story building, which extends towards Diamond Head and Palolo. The hospital buildings are scattered about in irregular form, but this very irregularity ensures that at all times there shall be a plentiful supply of fresh air, a most important essential in a home of this nature. Many of the patients, indeed, live entirely in the open, two wards being so constructed as to afford shelter from the sun and rain only, while permitting an interrupted flow of air over each bed.

To the left of the entrance is the public waiting room, and upstairs from the offices are several rooms for non-tubercular patients, rooms which are roomy and scrupulously clean. The spacious lanais command excellent views of the surrounding country, and afford the patients ample room for walking about. It might here be mentioned that whenever possible the patients are permitted to roam at will about the premises, keeping of course, to their own wards, for the tubercular patients are not allowed to mix with the non-tubercular. The separation of these patients, one from the other, is one of the most important features of the home. The food supplied to the tubercular patients is cooked in one kitchen and the food for the rest of the patients in another kitchen situated in an entirely different portion of the grounds. The tubercular patients each receive their food on a special tray which is used for no one else; the fork, plate, cup, etc., used by any tubercular patients are used by that one only, right up to the time they leave the hospital.

The toilet appointments in the hospital are as open as possible and are so constructed as to show the presence of any foreign matter, such as dirt or refuse. This makes it a simple matter for the attendants to keep the places clean. Dust and dirt can find no permanent lodging place in such an establishment as this, where it is imperative that the germs be not permitted to multiply, where they can be eradicated. The cleanliness of the hospital is one of its most noticeable characteristics.

All the rooms are clean and tidy,

though none are furnished in anything approaching a sumptuous manner.

In the non-tubercular wards, which were first visited by the Star representative, were a number of old identities of Honolulu, men who have fallen upon hard times and who have been stricken down by adversity. They number among them men who have made history in the islands, but all are now but shadows of their former selves. Here and there as we went through the wards Mr. Taylor pointed out first one and then another. Here was one old man who had spent thirty-nine years in the islands; there was an ex-captain, the greater portion of whose life had been spent around the islands; there was a Porto Rican boy who had been injured on a plantation and was paralyzed from the waist down; and there were many others, whose life stories were full of interest yet now overshadowed by the calamities which had befallen them in later years. Some were in their dotage and simply lived on with very little interest in life.

John Richards, once a Colonel in the Queen's Own, when Queen Kapiolani reigned, lay in his cot and chatted cheerily for awhile. The fires of intelligence still burned brightly in his eyes and he spoke with feelings of gratitude in praise of the home. He declared that he was as comfortable as he could be, considering his infirmities; that the treatment he received was splendid and that he would rather be in the home than anywhere else he knew of. He had had several paralytic seizures but still lived on, though broken down in health.

Whilst we were speaking to other patients an elderly Hawaiian passed by with a pail in his hands, bent on performing some duty or other.

"That's old Benny," said Mr. Taylor, "one of the original fifteen who came into the home when it was first opened on the closing of the Victoria Hospital. There are only three of them remaining now, and Benny is one."

Benny turned and smiled as he moved off; he appreciated the superintendent's kindly remarks, though they took him back through many years of suffering.

From the two wards left of the office we passed over to the other side and visited the dispensary, outside of which hangs a wall plate dedicated to the memory of Charles L. Carter, who was killed at Waikiki during the political troubles of 1895 and who had been of great help to the institution. A couple of feet away is a Mackintosh electrical battery, erected by Mrs. S. E. Damon to the memory of S. E. Damon, the first treasurer of the institution. The dispensary is well stocked with drugs of all kinds needed in the work of the hospital. It is open at all times. Outside this room are two large tanks from which the water supply was formerly drawn.

To the right are the wards for the tubercular patients, all open to the air. There were a number of patients in the first ward, some of whom were in the advanced stage of consumption. The open air ward is next and here the patients receive all the benefits fresh air can give them. The new open air ward, with its twelve beds, hip roof and raised skylight, is a modern building, provided with a spacious verandah. It is set apart for women, the men undergoing the open air treatment being in the first-mentioned open air ward. From the windows of these two wards a clear view out to sea on the one side and across the fort to Diamond Head on the other can be obtained by the patients simply turning their heads, thus adding a little interest to their quiet lives.

The laundry room, water-heating room and kitchens are models of cleanliness. The housewife's heart would be cheered could she step into a kitchen of such cleanliness as those at the home. Every utensil is thoroughly scoured before use, and as already stated, each patient has his or her own outfit. In the large dining room where those who can assemble to dine the same care is taken with the food in order to minimize every risk of contagion from one patient to another.

In a little cottage standing apart from all the others lives an elderly Chinaman, over eighty years of age, in fact. His wife and he were taken in the home and cared for, but some little time back the woman died and the man now lives alone. He is a devout Christian, speaks very little English and gives thanks daily for the haven which is afforded him by the charity of the home.

For the assistant superintendent and his wife, who acts as matron, a cottage is provided, with stables, and there is also a fowl-run and a small garden. The grounds have not had a great deal of time bestowed on them, chiefly because the funds necessary to pay for their improvement have not been forthcoming. Even so, however, a wonderful improvement has been made in the aspect of the grounds within the past few years and they are gradually assuming an attractive appearance. The rough ground has been leveled, grass and trees planted; and lawns have been made and are still in the making.

The fact that the institution is

known generally as the home for incurables has militated against its success to quite an appreciable extent. It is not a home for incurables, as will be seen from the figures here appended. During the present year there have been 85 admissions to the home and 34 discharges, deaths totaling 47. Of the admissions 65 were tubercular and 20 non-tubercular; of the discharges 30 were tubercular and 4 non-tubercular; of the deaths 37 were tubercular and 10 non-tubercular. The following table shows the results attained in the cases of the discharged patients during the year:

	Tubercular.	Non-Tubercular.
Apparent cure.....	11	2
Improvement.....	5	2
No improvement....	8	6
Total.....	24	10

The non-tubercular patients include many diseases, paralysis, asthma, cancer, ulcers, general debility, etc. As a rule the non-tubercular patients admitted are those who are practically hopeless cases, and are put in the home in order that they might be treated while at the same time enjoying whatever comforts they can still extract from life. Many of the patients are brought to the home too late to be improved by the treatment followed, and in a great measure this accounts for the high death rate given above.

The home is indebted to a host of generous friends who have at one time or another aided financially or otherwise. Mrs. C. M. Cooke, Mrs. S. M. Damon, Mr. George R. Carter, Mr. G. N. Wilcox, of Kaula; Bishop Willis and Theo. H. Davies, are but a few names which occur to the mind at the moment, but there are many, many others.

The home is absolutely non-sectarian. Services are held in the home by ministers of all denominations at various times, and among those who visit the home at regular intervals must be mentioned Father Valentin, one of the home's best friends. Mr. George Davies is another constant visitor, who helps the home along in various ways. Without this outside help the home could not do half the good it does, and with increased assistance from the public the utility of the home would further advance.

The staff includes twenty persons, chief among whom are: Dr. A. N. Sinclair, Medical Superintendent; Mr. H.

A. Taylor, Assistant Medical Superintendent; Mrs. Taylor, Matron, and Mr. F. Anderson, pharmacist and nurse.

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